

mental health education program. Refer to chapter PW-MH 60. Mental health staff members shall cooperate and assist in designing and carrying out the mental health education program, providing their specialized knowledge on a regular, established basis to a variety of specified activities of the service. In cooperation with the education specialist maintained by the board, additional education staff may be employed on a full-time or part-time basis. Education services can also be contracted for through the same procedures followed for other service elements contracts.

(4) **EDUCATION SERVICE CONTENT.** No less than 10% of the total mental health program staff time exclusive of clerical personnel and inpatient staff shall be devoted to education. The service shall include:

- (a) Public education
- (b) Continuing education
 - 1. Inservice training
 - 2. Staff development

(5) **EDUCATION PROGRAM.** There shall be a planned program of public education designed primarily to prevent mental illness and to foster understanding and acceptance of the mentally ill. A variety of adult education methods shall be used including institutes, workshops, projects, classes and community development for human services agencies, individuals and for organized law groups and also the public information techniques for the general public. There shall be a planned program of continuing education using a variety of adult education methods and available educational offerings of universities, professional associations, etc. for agency staff and related care-giving staff.

History: Cr. Register, March, 1977, No. 255, eff. 4-1-77.

STANDARDS COMMUNITY MENTAL HEALTH CHILDREN AND ADOLESCENTS ADDITIONAL REQUIREMENTS

PW-MH 60.70 Introduction and personnel requirements. (1) INTRODUCTION. The following standards have been developed for community mental health services for children and adolescents. Except for the substitution of minimal hourly requirements, these standards are intended to be in addition to PW-MH 60.61 through PW-MH 60.69 and are consistent with those stated in Standards for Psychiatric Facilities Serving Children and Adolescents, published by the American Psychiatric Association; and the Joint Commission on Accreditation of Hospitals. Planning psychiatric facilities and services for children and adolescents is difficult and complex. These standards are intended to insure a continuity of care notwithstanding the complexities involved. To accomplish this each service must:

- (a) Consider the children and adolescents development needs as well as the demands of the illness;

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(b) Have cognizance of the vital meaning to children and adolescents that group and peer relationships provide;

(c) Recognize the central importance of cognitive issues and educational experiences;

(d) Recognize the children and adolescents relative dependence on adults;

(e) Place some importance on the children and adolescents receiving repeated recognition for accomplishments;

(f) Provide an individualized treatment program by so structuring the environment to allow for optimal maturational, emotional and chronological growth.

(2) **PERSONNEL REQUIREMENTS.** The following personnel requirements are relevant only to children and adolescents' services and are applicable for each program. These requirements are in addition to the personnel qualifications listed in the General Provisions of Standards for Community Mental Health, Developmental Disabilities, and Alcoholism and Other Drug Abuse Services, chapter PW-MH 60.

(a) *Psychiatry.* Special effort shall be made to procure the services of a child psychiatrist who is licensed to practice medicine in the state of Wisconsin and is either board eligible or certified in child psychiatry by the American Board of Psychiatry and Neurology. If a child psychiatrist is unobtainable, special effort shall be made to procure a psychiatrist who has had a minimum of 2 years clinical experience working with children and adolescents.

(b) *Nursing service.* 1. Registered Nurses and Licensed Practical Nurses. Special effort shall be made to procure the services of registered nurses and practical nurses who have had training in psychiatric nursing. A portion of this training shall have been with emotionally disturbed children and adolescents.

2. Aides, child care workers and other paraprofessionals. Each service shall make a special effort to recruit the aides, child care workers and paraprofessionals who have the following background.

a. College or university credit or non-credit courses related to child care.

b. Vocational courses planned for child development.

c. High school diploma and experience in children or adolescents' related activities.

(c) *Activity therapy.* Each program, excluding outpatient, shall provide at least one full-time activity therapist. In addition to having formal training in children and adolescents' growth and development, preference shall be given to those professionals who have had clinical training or professional experience with emotionally disturbed children and adolescents.

(d) *Social service.* The social worker shall have had 2 years experience working with children and adolescents.

(e) *Psychological service.* Each service shall employ or contract for the service of a clinical psychologist who shall have the appropriate experience in the area of children and adolescents. Providers of psychological services who do not meet these requirements shall be supervised by a qualified psychologist.

(f) *Educational service.* Each child and adolescent service shall have associated with that service at least one teacher either employed by the service or by a local educational agency.

(g) All personnel shall participate in a documented in-service education program at a minimum of 48 hours per year, relating to areas of mental health concepts of children and adolescents.

History: Cr. Register, March, 1977, No. 266, eff. 4-1-77; am. (2) (c), Register, March, 1979, No. 279, eff. 4-1-79.

PW-MH 60.71 Children and adolescents mental health inpatient program. The following personnel requirements are minimum. There is no intention to restrict new programs to these minimal staffing patterns. Existing treatment programs which exceed these requirements may not be reduced without extensive and thorough review and a clear realization of what services would be lost by reduction.

(1) **REQUIRED PERSONNEL.** (a) *Psychiatry.* Each child and adolescent mental health inpatient service shall provide a minimum of 1.4 hours a week psychiatric treatment time per patient under care. Additional psychiatrists, as needed, shall be available for inpatient visits in order to carry out an adequate treatment program. For emergency purposes a psychiatrist will be on call 24 hours a day each day the facility is in operation. A psychiatrist shall be readily accessible by telephone and ideally, be able to reach the facility within one hour of being called.

(b) *Nursing service.* 1. The following schedule of licensed nursing coverage is minimal.

Day Shift	Evening Shift	Night Shift* (see below)
.64 hrs/pat/day or 4.48 hrs/pat/wk	.64 4.48	.32 2.24

* If child and adolescent service is part of an adult hospital with adjacent units, nursing service could be shared with other services on night shift. Such nursing coverage should be documented in total nursing schedule for child and adolescent unit.

2. Aides, child care workers and other paraprofessionals. Child care workers are primarily responsible for day-to-day living experiences of the children. They also carry out assigned aspects of the treatment program under the direction and supervision of designated treatment staff. Each service shall employ a sufficient number of aides, child care workers and paraprofessionals to provide the following minimal care:

Day Shift Children (0-12)	Evening Shift	Night Shift
.98 hrs/pat/day or 6.86 hrs/pat/wk	1.28 8.96	.64 4.48

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Day Shift	Evening Shift	Night Shift
Adolescent (over 12) .80 hrs/pat/day	1.10	.40
or		
5.60 hrs/pat/wk	7.70	2.80

(c) *Activity therapy.* The inpatient service shall maintain a ratio of 1.6 hours of activity therapy staff time per patient per week. Additional therapists may be employed as needed. In addition sufficient free time for unstructured but supervised play or activity will be provided.

(d) *Social service.* Each service shall employ at least one full time social worker and provide for a minimum of 1.6 hours per week per patient under care.

(e) *Psychological service.* Each service must provide a minimum of one hour per week of psychology time for each patient under care.

(f) *Educational service.* Each mental health inpatient service for children and adolescents is responsible for providing or arranging for special educational programs to meet the needs of all patients being served in the facility. If the service provides its own school program, 4.8 hours per patient per week of teacher time is considered minimal care.

(g) *Vocational service.* If indicated by patient need each inpatient service shall make available a vocational program to each adolescent 14 years of age and older according to the individual patient's age, developmental level and clinical status. This program will be under the auspices of a vocational counselor and is to be carried out in conjunction with, and not in place of the school program. Vocational counseling and training shall be a minimum of 1.3 hours per patient per week, if the service operates its own school program and .8 hour per patient per week, if the facility uses public or other schools.

(h) *Speech and language therapy.* Each mental health inpatient service shall provide one hour per patient per week minimal care of speech and language therapist time for children and adolescents diagnosed as requiring such therapy.

(i) *Add-on factor.* To account for vacation time, sick leave or other absences to which employes may be entitled, the application of a "post shift" factor of 1.59 should be calculated for treatment posts staffed 7 days a week and 1.13 for those staffed 5 days a week. In addition, a 20% factor should be used to account for patient charting, planning and other non face to face care which is required to maintain the program.

Example of calculation for a 10 bed unit:

Nursing-RNs (7 day week) Psychiatry-Psychiatrists (5 day week)